PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number					ber
								9/76556					
		CLAIMS A	(Column 1) (Column 1)			ımn 2)	SMALI TYPE		ENTITY		OR	OTHER THAN	
TOTAL CLAIMS								RATE FEE		FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		7	BASIC FEE 355.00		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2 minus 20=		• /			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		•			X40=			OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+135=			OR	+270=	
• It	the difference	in column 1 is	less than zero, enter "0" in column 2			olumn 2		TOTAL			OR	TOTAL	7/c
INVILLE CLAIMS AS AMENDED - PART II								. •	- 1		10	OTHER	
LD.	1/12/05	(Column 1)	(Column 2)			(Column 3)		SMALL		NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	}	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.20	Minus	-2	0	=		X\$ 9=	.		OR	X\$18=	
	Independent	· 2)	Minus	<u>3</u>		7		X40=			OR	X80=	
	FIRST PRESE	NTATION OF M	JLI IPLE DEI	PENUENI	CLAIM		١ ا	+135=			OR	+270=	
								TOT				TOTAL	
(Column 1) (Column 2) (Column 3)								ADDIT. FE	EE L	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=			OR.	X\$18=	
	Independent	AUTATION OF M	Minus	***	CI AIAA	= .		X40=	1		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF MI	JETIPLE DEF	ENDENT	CLAIM		]	+135=	1		OR	+270=	
							ı	TOTA	T		OP.	TOTAL	
		(Column 1)		(Colum	nn 2)	(Column 3)		ADDIT. FE	:E <b>L</b>		,	ADDIT. FEE	
		CLAIMS		HIGH	EST		lг		<b>T</b>	ADDI-			ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID	USLY	PRESENT EXTRA		RATE		FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=	]	X\$ 9=	١		OR	X\$18=	
	Independent	•	Minus	***		-		X40=	1		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+	——	<b>ОП</b>		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE											OR ,	TOTAL ADDIT. FEE	
		ber Previously Pai					er fou	nd in the a	appr	opriate box	in col	umn 1.	